Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10764274

CLAIMS AS FILED - PART I								····	10 .		~7		
		CLAIIVIS AS	(Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER SMALL		
TOTAL CLAIMS			166				.	RATE	FEE	1	RATE	FEE	
FOR ·			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
то	TAL CHARGEA	BLE CLAIMS	166 min	us 20=	* 146			X\$ 9=	1314	OR	X\$18=		
INDEPENDENT CLAIMS			'4 mi	nus 3 =	* `1			X43=	712	OR	X86=		
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT					+145=	13	OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in o						olumn 2		TOTAL	1747	OR	TOTAL		
CLAIMS AS AMENDED - PART II									1112	Oit	OTHER	THAN	
		(Column 1)		(Colum		(Column 3)		SMALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*.	Minus	**		=	X\$ 9=		OR	X\$18=			
AME	Independent	*	Minus	***		=		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						I	·+145=		OR	+290=		
								TOTAL		OΒ	TOTAL		
(Column 1) (Column 2) (Column 3)								ADDIT. FEEON ADDIT. FEE					
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**	·	<u>.</u> =		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	Ī	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145≐		OR	+290=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT, FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	EST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=	,	QR	X\$18=		
ME	Independent	*	Minus	***		=	ľ	X43=			X86=		
	FIRST PRESE	NTATION OF M	LTIPLE DEPENDENT		CLAIM	M .		7,10-		OR			
	16 th a a=t=: '			0 - "	#O# !-	luma C		+145=		OR	+290=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE												
		ther Previously Pai							sansiata bay	امم ما	l		